## Dismissal Request for Animal Rabies Vaccination or County Animal Registration (All blanks must be filled in and submitted by the defendant)

\*This request and copy of receipt must be filed in the clerk's office on or before your appearance date\*

Defendants Name:				
Address:				
#	Street	City	State	Zip
Place of employment: _				
Home Phone:	Work Phone: _		Cell:	
Offense (circle one):	No Rabies Vaccination	or	No County Animal Reg	jistration
on the date of:			_ Cause Number:	
I, do hereby request d	smissal for the following:			
	oof of Anti-Rabies Vaccination ted within ten working days			
	y of Round Rock Animal Regis			was
this offense. I further of this violation and sathet it is my responsible.	at I have not been charged with certify that the documentation has not be will to contact the Round Row be dismissed by a Judge.  Date	on I am <sub>I</sub> een alte	producing is for the anim red in any way. Addition	al that is the subject ally, I do understand
Delendant's Signature				
	States Moti	on to I	Dismiss	
	e, acting by and through the Pro Dismiss the above entitled and			
produced information th	not been charged with this offer at his/her animal is currently var vorking days from the day the content e be dismissed.	accinated	d for rabies (and) (or) regis	tered with the City of
	Prosecutor, C	ity of Ro	und Rock	
On this day ( ) Denies the motion			ss has been reviewed and	the court hereby
Municipal Judge	Rev 7.	2006		

Round Rock Municipal Court 301 West Bagdad Avenue, Suite 120 Round Rock, Texas 78664 Ph: (512) 218-5480 Fax: (512) 218-7079